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Title: Request for Religious Exemption from COVID-19 Vaccine

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Request for Religious Exemption from COVID-19 Vaccine

Name: _____

Z#: _____

Organization: _____

As required by law, Triad will consider employee requests for an accommodation that excuses an employee from the COVID vaccine requirement based upon sincerely held religious beliefs. Such accommodations will be granted if:

1. The employee has a sincerely held religious belief that prohibits becoming vaccinated; *and*
2. The accommodation of this religious belief will not result in an undue hardship for Triad.

When this form is complete, send it to: employee_relations@lanl.gov

In the space below, provide a statement explaining the religious basis for your accommodation request. Explain the religious principles underlying your request including how you have applied these principles to other medical issues, such as vaccines, medical procedures, medication, and doctors' visits. Provide any related documentation that establishes you sincerely hold a religious belief that prohibits your receipt of the vaccination.

In the space below, provide a statement explaining what accommodation you are seeking, and how the requested accommodation can be implemented without causing undue hardship to Triad or other employees.

Before granting an accommodation, Triad may require an interview to discuss the answers you have provided and may require you to provide additional documentation in support of your religious belief and accommodation request.